



**State of Michigan**  
John Engler, Governor

**Department of Consumer & Industry Services**  
Kathleen M. Wilbur, Director

**Bureau of Health Systems**

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## **MEMORANDUM**

**To: Long Term Care Facilities**

**From: Quality Improvement Nurse Consultation Program**

**Subject: Immunization Consent Form**

The QINC Program has designed an example of an Influenza Immunization Informed Consent. Utilization of this consent form may eliminate the need to have yearly consent forms signed for each resident. This form has been reviewed by the Bureau of Health Systems, the State Attorney General's Office, and the Department of Community Health. If you wish to use it at your facility, please have your attorney review it specific to your needs.

**[Feel free to review or print Influenza Immunization Informed Consent and modify as needed](#)**